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**REQUEST FOR WITHDRAWAL  
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Application Number	10/666,914
Filing Date	09/19/03
First Named Inventor	Fike
Art Unit	2883
Examiner Name	Kalivoda, C.
Attorney Docket Number	CNF-007

**To: Commissioner for Patents  
P.O. Box 1450  
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Please withdraw me as attorney or agent for the above identified patent application, and

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- ☒ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Testa, Hurwitz & Thibault, LLP is in dissolution. The client has elected to move its patent materials to a new firm.

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1. ☐ The correspondence address is NOT affected by this withdrawal.
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<input checked="" type="checkbox"/> Firm or Individual Name	Mr. Thomas E. Anderson				
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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